

ANNUAL LAND APPLICATION REPORT

Section 283.55(1) or 281.48(3)(b), Wis. Stats.

Form 3400-55 Rev. 11-97

WPDES Permit No: **0036820**

Permittee/Licensee Name: **MILWAUKEE METRO SEW DIST COMBINED**

FID Number: **241487400**

County: **Milwaukee**

Form requires electronic submittal by January 31

Please keep a completed version of the form for your records.

Year Submitted for : **2015**

☐ Did you land apply this period

Total Municipal Sludge Generated **37,106** Metric tons

Total Municipal Sludge Land Applied **0** Metric tons

DNR #	Fac Site #/ Field #	Landowner	Acres Land Applied	Outfall No*	Amount of Waste	Units	N supplied from waste (lbs/acre)	Other Sources of N (lbs/acre)	Crop Code	Crop Year	Nitrogen Rec. (lbs/acre)	Method	Chlorides Applied (lbs/acre)	Site no longer used
-------	---------------------------	-----------	--------------------------	----------------	-----------------------	-------	--	-------------------------------------	--------------	--------------	--------------------------------	--------	------------------------------------	---------------------------

Comments: There was no land application of Class B biosolids in 2015.

* If the waste applied is septage, indicate 990 if septic tank waste, 995 if holding tank waste, or 997 if more than 25% grease interceptor waste.

Completion and submission of this form is mandatory under section 283.55, Wis. Stats., and NR 204 or 214 Wis. Adm. Code, or 281.48(3)(b), Wis. Stats., and NR 113 Wis. Adm. Code. Failure to properly complete and submit this form is a violation of section 283.91 or 281.48, Wis. Stats., and may result in a monetary penalty and/or imprisonment. Personally identifiable information on this form is not intended to be used for any other purpose.

I certify, under penalty law, that information gathered to determine compliance with applicable pollutant concentrations, pathogen, vector control requirements, and management practices, as specified in chs. NR 204, 113 or 214, Wis. Adm. Code, has been prepared under my direction and supervision in accordance with a system designed to ensure that qualified personnel properly gathered and evaluated this information. I am aware that there are significant penalties for false certification, including the possibility of fine and imprisonment.

Signee's Name

Title

Date Signed